## PART B - FEE(S) TRANSMITTAL

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appropriate. All further indicated unless correcte maintenance fee notifical	correspondence including the below or directed other tions.	of transmitting the 133c ag the Patent, advance or herwise in Block 1, by (a	ders and notification a) specifying a new co	of mai	intenance fees wi ondence address; a	ll be r and/or	nailed to the current of (b) indicating a separ-	orrespondence address as ate "FEE ADDRESS" for
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23859 Ballard Spahr I SUITE 1000 999 PEACHTRE	EE STREET		Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
ATLANTA, GA	30309-3915				Kevin W.	Hatl	neock	(Depositor's name)
					- KS22/	fac	beal	(Signature)
				<u> </u>	January 5	, 20	710 \	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN		₹ ATTORNEY I		RNEY DOCKET NO.	CONFIRMATION NO.
10/585,199 TITLE OF INVENTION	08/08/2006 : POLYMERIZATION I	PROCESS	Kalle Kallio			С	4150.0028U1	9440
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE P	PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300		\$0		\$1810	01/06/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS					
TESKIN,	FRED M	1796	526-070000					
<ol> <li>Change of correspondence address or indication of "Fee Address" CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspond Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custo Number is required.</li> <li>ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  THE PATENT (print or type)					
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Please check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent):	☐ Ir	ndividual <b>E</b> Cor	porati	on or other private grou	p entity Government
	10.00)	oermitted)(\$300.00)	A check is enclos	ed. it card. creby a	Form PTO-2038 -	<del>is atta</del> e the r	equired fee(s), any defi	web filing
5. Change in Entity Sta	tus (from status indicated s SMALL ENTITY state		□ h. Amplicant is no	longe	r claiming SMAI	I ENIT	TTY status. See 37 CF	R 1 27(a)(2)
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Authorized Signature	records of the United Sta	ites Patent and Trademark	Office.		Date Janua	ry .	5, 2010	
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